

# EXHIBIT 1

NEW JERSEY DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES

**CERTIFICATE OF FORMATION**

**SWIFT INNOVATIONS LLC**  
**0451036091**

The above-named DOMESTIC LIMITED LIABILITY COMPANY was duly filed in accordance with New Jersey State Law on 10/17/2023 and was assigned identification number 0451036091. Following are the articles that constitute its original certificate.

**1. Name:**  
SWIFT INNOVATIONS LLC

**2. Registered Agent:**  
AVI ALHAKIM

**3. Registered Office:**  
55 TALMADGE RD  
EDISON, NEW JERSEY 08817

**4. Business Purpose:**  
WHOLESALE, GENERAL MERCHANDISE

**5. Effective Date of this Filing is:**  
10/17/2023

**6. Members/Managers:**  
AVI ALHAKIM  
62 LANCASTER AVE FL 3RD  
BROOKLYN, NEW YORK 11223

**7. Main Business Address:**  
55 TALMADGE RD  
EDISON, NEW JERSEY 08817

**Signatures:**

AVI ALHAKIM  
AUTHORIZED REPRESENTATIVE

*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
17th day of October, 2023*



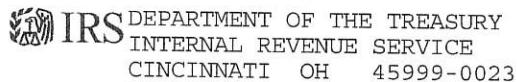
*Elizabeth Maher Muoio*

Elizabeth Maher Muoio  
State Treasurer

*Certificate Number : 4222972042*

*Verify this certificate online at  
[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)*

# **EXHIBIT 2**



Date of this notice: 10-17-2023

Employer Identification Number:  
93-3947224

Form: SS-4

Number of this notice: CP 575 G

SWIFT INNOVATIONS LLC  
AVI ALHAKIM SOLE MBR  
62 LANCASTER AVE FL 3RD  
BROOKLYN, NY 11223

For assistance you may call us at:  
1-800-829-4933

IF YOU WRITE, ATTACH THE  
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 93-3947224. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did **not** apply for this EIN, please contact us at the phone number or address listed on the top of this notice.

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

A limited liability company (LLC) may file Form 8832, *Entity Classification Election*, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, *Election by a Small Business Corporation*. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at [www.irs.gov](http://www.irs.gov). If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

(IRS USE ONLY) 575G

10-17-2023 SWIF O 9999999999 SS-4

**IMPORTANT REMINDERS:**

- \* Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- \* Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- \* Refer to this EIN on your tax-related correspondence and documents.
- \* Provide future officers of your organization with a copy of this notice.

Your name control associated with this EIN is SWIF. You will need to provide this information along with your EIN, if you file your returns electronically.

Safeguard your EIN by referring to Publication 4557, Safeguarding Taxpayer Data: A Guide for Your Business.

You can get any of the forms or publications mentioned in this letter by visiting our website at [www.irs.gov/forms-pubs](http://www.irs.gov/forms-pubs) or by calling 800-TAX-FORM (800-829-3676).

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter.

Thank you for your cooperation.

Keep this part for your records.

CP 575 G (Rev. 7-2007)

-----  
Return this part with any correspondence  
so we may identify your account. Please  
correct any errors in your name or address.

CP 575 G

9999999999

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 10-17-2023  
( ) - EMPLOYER IDENTIFICATION NUMBER: 93-3947224  
----- FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE  
CINCINNATI OH 45999-0023  
[Barcode]

SWIFT INNOVATIONS LLC  
AVI ALHAKIM SOLE MBR  
62 LANCASTER AVE FL 3RD  
BROOKLYN, NY 11223

# EXHIBIT 3

**STATE OF NEW YORK**  
**DEPARTMENT OF STATE**

I hereby certify that the annexed copy has been compared with the original document in the custody of the Secretary of State and that the same is true copy of said original.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on November 23, 2020.



Brendan C. Hughes  
Executive Deputy Secretary of State

ARTICLES OF ORGANIZATION  
OF  
BH Elegant Linens LLC

Under Section 203 of the Limited Liability Company Law

**FIRST:** The name of the limited liability company is:

**BH Elegant Linens LLC**

**SECOND:** The county, within this state, in which the office of the limited liability company is to be located is KINGS.

**THIRD:** The Secretary of State is designated as agent of the limited liability company upon whom process against it may be served. The address within or without this state to which the Secretary of State shall mail a copy of any process against the limited liability company served upon him or her is:

BH Elegant Linens LLC  
55 Talmadge Rd  
Edison, NJ 08817

**FOURTH:** The limited liability company is to be managed by: ONE OR MORE MEMBERS.

**FIFTH:** The existence of the limited liability company shall begin upon filing of these Articles of Organization with the Department of State.

**SIXTH:** The limited liability company shall have a perpetual existence.

**SEVENTH:** The limited liability company shall defend, indemnify and hold harmless all members, managers, and former members and managers of the limited liability company against expenses (including attorney's fees, judgments, fines, and amounts paid in settlement) incurred in connection with any claims, causes of action, demands, damages, liabilities of the limited liability company, and any pending or threatened action, suit, or proceeding. Such indemnification shall be made to the fullest extent permitted by the laws of the State of New York, provided that such acts or omissions which gives rise to the cause of action or proceedings occurred while the Member or Manager was in performance of his or her duties for the limited liability company and was not as a result of his or her fraud, gross negligence, willful misconduct or a wrongful taking. The indemnification provided herein shall inure to the benefit of successors, assigns, heirs, executors, and the administrators of any such person.

I certify that I have read the above statements, I am authorized to sign these Articles of Organization, that the above statements are true and correct to the best of my knowledge and belief and that my signature typed below constitutes my signature.

# EXHIBIT 4

Form **8995**Department of the Treasury  
Internal Revenue Service**Qualified Business Income Deduction  
Simplified Computation**

OMB No. 1545-2294

**2022**Attachment  
Sequence No. 55Attach to your tax return.  
Go to [www.irs.gov/Form8995](http://www.irs.gov/Form8995) for instructions and the latest information.

Name(s) shown on return

AVI ALHAKIM

Your taxpayer identification number

**Note.** You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$170,050 (\$340,100 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)
i	BH ELEGANT LINENS LLC	85-4002137	
ii			
iii			
iv			
v			

2	Total qualified business income or (loss). Combine lines 11 through 1v, column (c)	2	
3	Qualified business net (loss) carryforward from the prior year	3	
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4	
5	Qualified business income component. Multiply line 4 by 20% (0.20)	5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6	
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7	
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8	
9	REIT and PTP component. Multiply line 8 by 20% (0.20)	9	
10	Qualified business income deduction before the income limitation. Add lines 5 and 9	10	
11	Taxable income before qualified business income deduction (see instructions)	11	
12	Net capital gain (see instructions)	12	
13	Subtract line 12 from line 11. If zero or less, enter -0-	13	
14	Income limitation. Multiply line 13 by 20% (0.20)	14	
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions)	15	
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-	16	
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-	17	

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

REV 07/23/23 PRO

Form **8995** (2022)